

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	7-12		4-18-00
O.I.P.E. CLASSIFIER		10	4-24-00
FORMALITY REVIEW	PH	71493	6-15-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	9/21/00
2	11/2/00
3	11/2/00
4	11/2/00
5	11/2/00
6	11/2/00
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8	11/2/00
9	11/2/00
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50	11/2/00

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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